

Family Child Care – Point Requirements for 3, 4 and 5 star Ratings

3, 4 and 5 star ratings will be determined by your score on the FCCERS-R conducted by a team member from the NJ Center for Quality Ratings, evidence of attending training in developmentally appropriate practices *and* the total number of points attained by meeting standards across all five categories.

	Requirements for Star Ratings							
Star Rating	FCCERS-R Required Scores (GNJK Standards: 1.3.1; 1.4.1; 2.3.1)	Implementation of Curriculum (GNJK Standards: 2.3.2; 2.4.1; 2.5.1)	Range of Points for required documentation					
公公公	Average of 3.75 No subscale below a 3.0	Provider has attended 5 hours of training in at least two Core Knowledge Areas focused on FCC Developmentally Appropriate Practices	19 - 29					
なななな	Average of 4.5 No subscale below a 4.0	Provider has attended 10 hours or more in at least three Core Knowledge Areas focused on FCC Developmentally Appropriate Practices	30 - 40					
ឋេជ្ជជាជា	Average of 5.0 No subscale below a 4.25	Provider has attended 20 hours of training or more in at least ten training topics, with at least 10 training hours completed in topics listed under Core Knowledge Areas: "Learning Environment and Curriculum" and "Child Growth and Development"	41 - 50					

You will be awarded points by meeting standards from each of the five categories. The following pages list the *Grow NJ Kids* standards for Family Child Care from Levels 3, 4 and 5 of each category and the amount of points each standard is worth. You can acquire points by meeting standards during the onsite review of documentation by the NJ Center for Quality Ratings and/or by electronically submitting documentation. Additionally, some items are qualitative and measured across more than one level. These items are listed horizontally and depending on documentation requirements, point values may be added together to acquire the maximum amount of points available. You can achieve *up to* those amount of points listed on those items by meeting the requirements for each leveled standard.

The box below describes the information in each box and how it is coded:

GNJK Criteria #	Level 3	Level 4	Level 5	Max. Pts.	My Pts.
Criteria #	Standard Description (Point Value) Required Documentation/Evidence *Special Notes Pt. Value			Max. # of points available	

Table of Contents

Maximum Points for Each Category	Error! Bookmark not defined.
Category 1: Safe, Healthy Learning Environment	5
Category 2: Curriculum and Learning Environment	7
Category 3: Family and Community Engagement	10
Category 4: Workforce/Professional Development	13
Category 5: Administration and Management	15

Maximum Points for Each Category

Grand Total	50 Points
Category 5: Administration and Management	10 Points
Category 4: Workforce/Professional Development	9 Points
Category 3: Family and Community Engagement	13 Points
Category 2: Curriculum and Learning Environment	12 Points
Category 1: Safe, Healthy Learning Environment	6 Points

Category 1: Safe, Healthy Learning Environment

GNJK Criteria #	Level 3			Max. Pts.	My Pts.
1.3.2	Daily physical activities for children to support gross motor skills and promote physical fitness that are age appropriate. Let's Move Child Care Checklist and daily schedule or lesson plans for prior 3 months.			1	
1.3.3	Based on US Department of Agriculture and Caring for Children, nutritious meals and snacks are encouraged and/or provided, and are respectful of religious and dietary restrictions. Sample menus for prior 3 months (FCCERS-R item 9, Indicator 3.2 scored "Yes" if meals are provided by families).			1	
1.4.2		Resources and information is provided to families regarding the benefits of outdoor play/physical fitness, nutrition, and obesity prevention. Documentation with parent signatures confirming receipt of Parent Handbook or resources with information about outdoor play, nutrition and obesity prevention.	1	1	

Category 1: Safe, Healthy Learning Environment

GNJK Criteria #	L	evel 4		Max. Pts.	My Pts.
1.4.3	preventative health health issues, nutrit medication adminis procedures, oral he communicable disease Documentation that information on at least	n topics that include: mental/behavioral on and obesity, ration policies and alth practices, se prevention. parents received		1	
1.5.1		daily bas children brushes a Tooth brush	tevel 5 r practices tooth brushing on a sis, at least once, with the and then stores the tooth appropriately. rushing policy with description of procedure in parent handbook.	1	
1.5.2		Provider breastfee including milk and for breas	r has a policy that supports eding friendly principles, g accepting and storing breast I providing a comfortable place stfeeding. eding policy in Parent Handbook. licable to enrolled children	1	
				6	

Category 2: Curriculum and Learning Environment

GNJK Criteria #	Level 3	Level 4	Level 5	Max. Pts.	My Pts.
2.3.2; 2.4.1; 2.5.1	Provider has pre-planned, daily activities that are aligned to the NJ Birth to Three Standards and/or the NJ Preschool Teaching and Learning Standards for the ages enrolled. Lesson plans from prior 3 months; training documentation of 5 hours or more in at least two Core Knowledge Areas focused on FCC Developmentally Appropriate Practices.	Provider implements a research-based, validated curriculum that is aligned to the NJ Birth to Three Standards and/or the NJ Preschool Teaching and Learning Standards and is supported through training specific to its implementation/developmentally appropriate practices. Lesson plans for prior 3 months with evidence of activities/experiences planned around the early learning standards; training documentation of 10 hours or more in at least three Core Knowledge Areas focused on FCC Developmentally Appropriate Practices	A curriculum reflective of current research and best practice must be in use, including individualized learning experiences to meet the developmental needs of each child, and any training required for its implementation. Lesson plans for prior 3 months with documented individual activities to support each child's identified early care/educational goal; training documentation of 20 hours or more in at least ten training topics, with at least 10 training hours completed in topics listed under Core Knowledge Areas: "Learning Environment and Curriculum" and "Child Growth and Development"; FCCERS-R Item 14 (Helping Children Use Language), Indicator 7.2 scored "Yes"	L 3	
2.3.3	Children whose first language isn't English are encouraged to use home language, gestures, communication devices, sign language, and pictures to communicate when needed. Evidence of home language policy/explanation of communication *This point will be waived if all children's first language is English. Please note this and evidence of this will be verified onsite.			1	

Category 2: Curriculum and Learning Environment

GNJK Criteria #	Level 4			Max. Pts.	My Pts.
2.4.2	A research-based developmental screening tool is used to identify children who may need additional evaluation and/or intervention strategies and results are shared with families. Copy of completed developmental screening tool for children enrolled more than 6 months; protocol/policy in Parent Handbook *Completed screening tools and parent signatures will be reviewed onsite in children's folders and will also be required to demonstrate this standard has been fully met in addition to what is listed here for electronic submission.)	2		2	
2.4.3	Strategies are used to engage children in learning and meaningful conversations by using open-ended questions and providing interesting learning opportunities throughout the day. FCCERS-R Item 14 (Helping Children Use Language), Indicator 5.2 scored "Yes"	2		2	
2.5.2			Level 5 A formative assessment aligned to the curriculum is used to address all developmental domains. Evidence of formative assessment at least twice a year. Documentation is based on the formative assessment used and may include copies of sample portfolios, observation forms, etc.	2	

Category 2: Curriculum and Learning Environment

GNJK Criteria #	Level 5	Max. Pts.	My Pts.
2.5.3	Transition planning for all children going to preschool or kindergarten that promote continuity from one setting to the next, incorporate family involvement and support and include successful intervention strategies for children who exhibit challenging behaviors. Transition Folder for children moving to a child care center/kindergarten* (Documentation should include: results from developmental screenings and assessments, documentation from parent conferences, behavioral support plans) *If no children moving to preschool/kindergarten, submit for each child: reports from family conferences that include 5 academic/behavioral goals for following year.	2 2	
		12	

Category 3: Family and Community Engagement

GNJK Criteria #	Level 3		Level 4	Level 5	Max Pts.	. My Pts.
3.3.1; 3.4.1; 3.5.1	Provider initiates strategies for working with families utilizing the Strengthening Families Protective Factors. Samples from at least three or more of the following strategies distributed within past 12 months: flyers, emails, photos, newsletters, media, etc. addressing one or more of the protective factors within the Strengthening Families Protective Factors Framework.	L	All newly enrolled families are offered and encouraged to complete the Strengthening Families (SF) Protective Factor Survey. Collated summary sheet with number of families enrolled and number of surveys returned from families. Copy of any/each survey(s) completed in past 12 months should be submitted	Strengthening Families principles and strategies are integrated into the work of the provider. Evidence of SFPF fully integrated (may include the annually updated SF Quality Improvement Plan, completed SF Self-Assessment for FCC, SF Action Plan based on outcomes from Self-Assessment and completed SF surveys filled out by parents).	4	
3.3.2	Provider shares information with families on age-appropriate early learning standards. Copy of two examples of information focused on age-appropriate early learning standards/Developmentally Appropriate Practice shared with families within past 12 months.	L			1	
3.3.3	Provider shares information on expectations and routines at enrollment and throughout the year. Copy of information related to program expectations and routines shared during enrollment and at least one other example shared with families within past 12 months	1			1	
3.3.4	Parents/families are encouraged to actively participate in activities or events that promote learning or family engagement. Copy of two examples of encouragement of/or parent participation within the past 12 months	1			1	

Category 3: Family and Community Engagement

GNJK Criteria #	Level 3	Level 5	Max. Pts.	My Pts.
3.3.5; 3.5.2	Provider informs parents of the local or regional community advisory council and meeting dates (i.e. this could be the County Council for Young Children). Copy of list of community organizations that welcome parent participants.	Encourage participation of parents on a local or regional community advisory council (i.e. this could be the County Council for Young Children, Human Services Advisory Councils, etc.) List of community organizations in which parents can be involved and copies of flyers/meeting information is shared with families.	2	
3.3.6	Families are provided with information and resources about health insurance enrollment, state nutrition programs, immunization schedules, lead poisoning, and mandatory lead screening. Documentation with parent signatures confirming receipt of Parent Handbook or resources with current information about health insurance enrollment, state nutrition programs, immunizations schedules, lead poisoning, and mandatory lead screening.		1	

Category 3: Family and Community Engagement

GNJK Criteria #	Level 4	Max. Pts.	My Pts.
3.4.2	Providers have parent meetings and/or parent conferences to communicate curriculum objectives, share child's developmental progress and work with families to set individual goals for the child and effective strategies to support learning at home. Evidence that parent conferences/ meeting with families were held at least two times over a 12 month period and at least one documented early care/educational goal identified for the child (documentation of conference/meeting offered and child's developmental progress provided to families in absence of meeting for families who may decline conference/meeting)	2	
3.4.3	Providers should provide education and/or information for parents/ guardians on good oral hygiene practices and avoidance of behaviors that increase the risk of early childhood caries, based on guidelines provided by Caring for our Children. Copy of oral hygiene policy and evidence of education and/or information provided to parents within last 12 months	1	
		13	

Category 4: Workforce/Professional Development

GNJK	Level 3		Max.	Му
Criteria #	Level 5		Pts.	Pts.
4.3.1	Provider receives training in the administration of the adopted developmental screening tool. Professional development in the adopted developmental screening tool *Reviewed on NJ Workforce Registry/Onsite		1	
4.3.2	Provider receives ongoing formal professional development that builds upon the required training for FCC registration. Required: 60 hours within three years *Reviewed on NJ Workforce Registry/Onsite in Provider Folders (Professional Development Plan)		2	
4.4.1		Provider receives professional development that prepares them to work with young children who have special needs. Professional development in the topic: a minimum of two hours and completed every three years *Reviewed on NJ Workforce Registry/Onsite	1	
4.4.2		Professional Development is received in the Pyramid Model, social, emotional development with special needs and infant/child mental health. Professional development in one of the topic areas: a minimum of two hours and completed every three years *Reviewed on NJ Workforce Registry/Onsite	1	

Category 4: Workforce/Professional Development

GNJK Criteria #	Level 5	Max. Pts.	My Pts.
4.5.1	Provider has at a minimum, FCC CDA or be enrolled in a CDA program. Current CDA Certificate or NJ Workforce Registry documentation *Reviewed on NJ Workforce Registry/Onsite	2	
4.5.2	Provider is an "active participant" in, at least, one professional early childhood related association. Copy of agenda from conference/ certificate of attendance/active membership certificate (must be current/from within prior year)	2	
		9	

Category 5: Administration and Management

GNJK Criteria #	Level 3		Max. Pts.	My Pts.
5.3.1	If the provider has an assistant, there are scheduled meetings each week to ensure the assistant receives feedback and is informed on all issues. If the provider uses a substitute or alternate, there is a process in place to share program policy updates and pertinent information regarding daily routines and activities and the children in care. Copy of schedule of meetings and agendas from the prior 3 months; written procedure for sharing information with substitute/alternate (if applicable) *If no assistant/sub, then this standard is not applicable and point will be waived upon verification of this onsite		1	F 13.
5.3.2	Written policies are provided to parents/families to include: substitute care arrangement, persons authorized to pick up the child, medication administration, emergencies, discipline policy, conferences, transportation if provided, visitors to the home, and field trips if provided. Parent Handbook listing policies and procedures regarding each of the items as applicable		1	
5.4.1		Level 4 Provider has marketing and recruitment strategies in place. Three examples of marketing and/or recruitment strategies	1	

Category 5: Administration and Management

GNJK Criteria #	Level 4				Max. Pts.	My Pts.
5.4.2	Provider implements appropriate record keeping to track income received, caregiving hours, business hours worked in the home, and business related expenses. If applicable, tracks meals and snacks served to children. Evidence that a tracking system is in place for each of the listed topics.	2			2	
5.4.3	Documentation of filing taxes (schedule C). Copy of most recent tax form filed	1			1	
5.5.1		-	Provider has a current operating budget that ensures an adequate cash flow and accounting practices. Copy of current operating budget with projected income and expense figures Provider has current Liability Insurance as	1	1	
5.5.2			a Family Child Care Provider. Copy of current liability insurance Provider solicits feedback from families on an annual basis through survey to evaluate the program and results are used to develop the program's improvement plan. Completed family/parent survey; improvement plan based on survey feedback	2	2	
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